

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

JUDGE DAVID GUADERRAMA**UNITED STATES DISTRICT COURT**

for the

Western District of Texas

Western Division

FILED
 2017 MAR 20 PM 1:43
 UNITED STATES DISTRICT COURT
 WESTERN DISTRICT OF TEXAS
 BY **EC**
 DEPUTY

Karen Mae Arnold

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Newt Hill

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No.

(to be filled in by the Clerk's Office)

EP 17 CV 0083Jury Trial: (check one) ☐ Yes ☒ No**COMPLAINT FOR A CIVIL CASE****I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Karen Mae Arnold
Street Address	5708 Bainbridge Avenue
City and County	El Paso, El Paso County
State and Zip Code	Texas 79924-6606
Telephone Number	915 751-3541
E-mail Address	rcraarnold@aol.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title *(if known)*. Attach additional pages if needed.

Defendant No. 1

Name	Newt Hill
Job or Title <i>(if known)</i>	U.S Army Claims Service/Office of the Judge Advocate General
Street Address	4411 Llewellyn Avenue, Suite 5360
City and County	Fort George G. Mead
State and Zip Code	Maryland 20755
Telephone Number	(301) 677-9456
E-mail Address <i>(if known)</i>	

Defendant No. 2

Name	
Job or Title <i>(if known)</i>	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address <i>(if known)</i>	

Defendant No. 3

Name	
Job or Title <i>(if known)</i>	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address <i>(if known)</i>	

Defendant No. 4

Name	
Job or Title <i>(if known)</i>	
Street Address	
City and County	
State and Zip Code	
Telephone Number	

E-mail Address (if known)

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (check all that apply)



Federal question



Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

Federal Tort Claims Act (FTCA), Title 28 of the United States Code, Sections 2671-2680
Torts Claim Division 15-122-T002

B. If the Basis for Jurisdiction Is Diversity of Citizenship**1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, (name) [redacted], is a citizen of the
State of (name) [redacted].

b. If the plaintiff is a corporation

The plaintiff, (name) [redacted], is incorporated
under the laws of the State of (name) [redacted].
and has its principal place of business in the State of (name)

[redacted].

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

2. The Defendant(s)**a. If the defendant is an individual**

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The defendant, (name) [REDACTED], is a citizen of
 the State of (name) [REDACTED]. Or is a citizen of
 (foreign nation) [REDACTED].

b. If the defendant is a corporation

The defendant, (name) [REDACTED], is incorporated under
 the laws of the State of (name) [REDACTED], and has its
 principal place of business in the State of (name) [REDACTED].
 Or is incorporated under the laws of (foreign nation) [REDACTED].
 and has its principal place of business in (name) [REDACTED].

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

William Beaumont Military Center (WBAMC) did not properly address Karen Arnolds abnormal blood levels from 2002 o 2013. This allowed a slow but steady abnormal rise in Karens blood levels that ultimately resulted in 6 brain strokes on 8 and 20 February 2013 from Polychthema Vera. From 2002 to 2006 Karen had 10 abnormal blood counts, 2008 to 2013 Karen 59 abnormal blood counts. William Beaumont never retested her blood counts or referred her to Oncology or Hemotology in all those years. I (Robert Arnold) personally talked to Dr. Patrik Naik (WBAMC), explained Karens health problems, then he did the research, found a history of abnormal blood counts, referred her to Texas Oncology and Dr. Aloha diagnosed the problem and the current treatment(s)

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Karen was a gifted artist, loving wife (33 years) and mother. William Beaumont Military Center took her health and art away from her by ignoring her abnormal blood levels. Karen cannot drive a vehicle (dizzy/pain), cannot paint or do other activities she once enjoyed. Karen lives a life of daily constant head pain, abnormal sleep patterns, fear (brain damage). Karen has permanent brain damage, diagnosed by Dr. Luis B. Acosta, her Neurologist. Karen has doctors appointments every other week, we have to pay some of her doctors out of our account (don't take Medicare). Karen used to make \$25-30,000.00 dollars a year with her art, but can't do that any more. For damages she is asking \$1,200,000 for pain, suffering, loss of employment, continuing medical payments, loss of many things she used to do, all caused by medical negligence.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

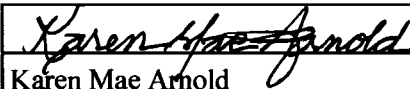
I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

17 March 2017

Signature of Plaintiff

Printed Name of Plaintiff



Karen Mae Arnold

B. For Attorneys

Date of signing:

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

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Street Address

State and Zip Code

Telephone Number

E-mail Address
